Steven K. Young, Director

DIA Amends Protocol Regarding Identification of Residents Eligible for VA Benefits

DES MOINES, IOWA (August 31, 2006) – The Iowa Department of Inspections and Appeals (DIA) has amended the protocol used by its health facilities surveyors to determine whether certain long-term care facilities are complying with the requirements of Iowa Code section 135C.31A, which requires that residents be assessed for eligibility for benefits from the U.S. Department of Veterans Affairs. "As a result of a legislative change made during this year's session of the Iowa General Assembly, long-term care providers no longer have to submit to the Iowa Department of Veterans Affairs (IDVA) the names of all residents admitted to their facilities," DIA Director Steve Young said.

Under the amended Code section, nursing facilities that receive reimbursements through the state's Medical Assistance Program (Medicaid) need only report the names of those residents whom they believe are veterans, the Director explained. In addition to the name of the potential veterans, facilities are to provide the name of the resident's spouse and any dependent children. The IDVA will then determine whether the resident is eligible for veterans' benefits. In the event that additional information is needed to determine a resident's veteran status, the Veterans Affairs Department is asking that the name of the person who provided the veteran status information also be provided.

Prior to the law change, facilities were required to submit the names of all residents to the state's Veterans Affairs Department along with the spouses' and dependent children's names. The new law simplifies the process and requires that only the names of potential veterans be submitted to the Iowa DVA. Young said staff from DIA's Health Facilities Division will review resident admission records as part of the normal survey process to determine whether the facilities have inquired about a resident's veteran status and submitted the names of potential veterans.

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